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not only recovered from the infection in the absence of detectable antibody but the surface antigen changed in the first relapse (Wright and Frost, 1978). It is possible that the absence of borrelial, lytic, agglutinating, and spirochaetal fluorescent antibodies need not mean that all antibody is removed. Antibody which might induce or modulate the antigenic variation could still be present. It is conceivable that the production of hypothetical antigen-modulating-antibody might be enhanced by a deletion of T lymphocyte suppressor effect. Damage caused by cellular or humoral immune mechanisms would thereby be controlled and the microbial persistence ensured.

In unpublished experiments with Professor John Turk, cyclophosphamide 150 m/kg was given to rabbits 10 days before intravenous *T. pallidum* inoculation. In the cyclophosphamide-treated rabbits lesions on the shaved, dorsal rabbit skin were exacerbated and the subsequent specific antibody titres were raised in these animals. Since spirochaetes were found only in the lesions and not in the unaffected tissue, the implication again is that there was an inhibition of T lymphocyte suppressor response rather than an increased effector cell activity.

Yours faithfully,

D. J. M. Wright and D. J. Frost

Department of Microbiology,
Charing Cross Hospital Medical School,
Fulham Palace Road,
London W6 8RF

References

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Notice

International Symposium on Sexually Transmitted Diseases

An international symposium will be held in conjunction with the first Pan American Congress of Andrology, 13–16 March 1979, in Caracas, Venezuela. The purpose is to initiate international co-operation and exchange of scientific information on current diagnosis and therapy of male diseases. Abstracts are accepted on urethral microbiology, gonococcal urethritis, aetiology and treatment of epididymitis, penile lesions, and genital herpesvirus; diagnostic tests for STD. Deadline: 1 December 1978. Programme director: F. N. Judson, M.D., Disease Control Service, 605 Bannock Street, Denver, Colorado 80204, USA (303) 893–7051.